

OFFICE OF LEGISLATIVE RESEARCH  
PUBLIC ACT SUMMARY



**PA 14-148—sHB 5386**  
*Public Health Committee*

**AN ACT CONCERNING CARE COORDINATION FOR CHRONIC DISEASE**

**SUMMARY:** This act requires the public health (DPH) commissioner to develop and implement a plan to (1) reduce the incidence and effects of chronic disease, (2) improve chronic disease care coordination in Connecticut, and (3) improve outcomes for conditions associated with chronic disease. She must develop the plan (1) within available resources and (2) in consultation with the lieutenant governor or her designee and local and regional health departments.

The plan must address chronic cardiovascular disease, cancer, lupus, stroke, chronic lung disease, diabetes, arthritis or another metabolic disease, and the effects of behavioral health disorders. It must be consistent with (1) DPH's Healthy Connecticut 2020 health improvement plan and (2) the state healthcare innovation plan developed under the State Innovation Model Initiative by the Centers for Medicare and Medicaid Services Innovation Center.

The act also requires the commissioner to report biennially on chronic diseases and the plan's implementation. The report must include several matters, such as a description of the diseases most likely to cause death or disability and recommendations for what health care providers and patients can do to reduce the diseases' incidence and effects.

EFFECTIVE DATE: October 1, 2014

**REPORTING REQUIREMENT**

The act requires the DPH commissioner, by January 15, 2015 and biennially thereafter, to report to the Public Health Committee on chronic disease and implementing the plan described above. She must do so in consultation with the lieutenant governor or her designee. The commissioner must post the reports on the department's website within 30 days after she submits them. The reports must include:

1. a description of the chronic diseases most likely to cause death or disability, the approximate number of people affected by them, and an assessment of each such disease's financial effect on the state, hospitals, and health care facilities;
2. a description and assessment of programs and actions that DPH and health care providers have implemented to improve chronic disease care coordination and prevent chronic disease;
3. the sources and amount of funding DPH receives to treat people with multiple chronic diseases and to treat or reduce the most prevalent chronic

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- diseases in the state;
- 4. a description of care coordination between DPH and health care providers to prevent and treat chronic disease; and
- 5. recommendations on actions health care providers and people with chronic diseases can take to reduce the incidence and effects of these diseases.

### BACKGROUND

#### *Chronic Disease*

According to the U.S. Department of Health and Human Services, “chronic diseases” are conditions lasting at least a year that require ongoing medical attention, limit activities of daily living, or both.

OLR Tracking: KM:KLM:PF:am